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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/541,702	01/17/2006	Junichi Kawakami	236211	9790
	7590 04/13/200 `& MAYER, LTD	EXAMINER		
TWO PRUDENTIAL PLAZA, SUITE 4900 180 NORTH STETSON AVENUE			SZNAIDMAN, MARCOS L	
CHICAGO, IL			ART UNIT	PAPER NUMBER
			1612	
			MAIL DATE	DELIVERY MODE
			04/13/2009	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/541,702	KAWAKAMI, JUNICHI	
interview Summary	Examiner	Art Unit	
	MARCOS SZNAIDMAN	1612	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>MARCOS SZNAIDMAN</u> .	(3)		
(2) <u>Jhon Kilyk (Attny for Applicant)</u> .	(4)		
Date of Interview: 26 March 2009.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)∏ applicant's representative	.]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed:			
Identification of prior art discussed:			
Agreement with respect to the claims f)☐ was reached. g	)∏ was not reached. h)∏ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>John Kilyk confirmed that</u>			was
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTEL A STATEMENT OF THE SUBSTANCE OF THE INTEL requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, V	been filed, APP ' DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
THAT DOOD OT HAVE HAVE			
/MARCOS SZNAIDMAN/			

Application No.

Applicant(s)